



# County of Burleson

## Employee Language Report

**Instructions:** Unless otherwise directed, each department/office shall maintain this log throughout the calendar year and submit it to the Burleson County Treasurer's Office, Title VI/Nondiscrimination Coordinator, by January 15th of each year. Submit via email at [ssmith@burlesoncounty.org](mailto:ssmith@burlesoncounty.org)

**Voluntary Participation:** Please indicate employees who possess language skills other than English and who are willing to assist a Limited English Proficiency (LEP) individual who requires language assistance.

Department: \_\_\_\_\_

Date: \_\_\_\_\_

LEP Department Contact: \_\_\_\_\_

Employee Name	Employee Phone	Language	Speaking			Reading			Writing			Understanding		
			Basic	Advance	Native	Basic	Advance	Native	Basic	Advance	Native	Basic	Advance	Native
<b>Place an 'x' in the column to indicate level of language skill</b>														